

Form CPF M 102: Campaign Finance Report TO WIN CLERK'S OFFICE CE STANDARD STANDARD

Municipal Form Office of Campaign and Political Finance

2019 DEC 13 AM RELD

of Massachusetts	File with: City or Town Clerk or Election Commission		
Fill in Reporting Period dates: Beginning Date:	1 2018 Ending Date: 12 31 2018		
Type of Report: (Check one)			
8th day preceding preliminary 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution		
Paul Schlichtman	Committee to Elect Paul Schlichtman Committee Name		
Candidate Full Name (if applicable)	Committee Name		
School Committee, Arlington Office Sought and District	Committee Name Camilla B. Haase Name of Committee Treasurer 88 Park Ave. #401, Arlington, MA 02476 Committee Mailing Address		
47 Muchic St #80 Arlington, MA 02474	1 88 Park Ave. #401 Arlington, MA 02476		
47 Mystic St., #8C, Arlington, MA 02474 Residential Address	Committee Mailing Address		
E-mail: paul@schlichtman.org	E-mail:		
Phone # (optional):	Phone # (optional):		
SUMMARY BALANC	CE INFORMATION:		
Line 1: Ending Balance from previous report	155.74		
Line 2: Total receipts this period (page 3, line 11) 0		
Line 3: Subtotal (line 1 plus line 2)	155.74		
Line 4: Total expenditures this period (page 5, lin	ne 14) O		
Line 5: Ending Balance (line 3 minus line 4)	155.74		
Line 6: Total in-kind contributions this period (p	age 6)		
Line 7: Total (all) outstanding liabilities (page 7)	630.00		
Line 8: Name of bank(s) used: Leader	Bank		
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-king finance activity of all persons acting under the authority or on hehalf of this committee i	d contributions and liabilities for this reporting period and represents the campaign		
Signed under the penalties of perjury: [amilia 6 . Haale	(Treasurer's signature) Date: 8 Dec. 2019		
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 b			
	·		
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in a incurred any liabilities nor made any expenditures on my behalf during this reporting.	the hest of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, and period that are not otherwise disclosed in this report.		
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts expenditures, discursement campaign finance activity of all persons acting under the authority or on behalf of the Signed under the penaltics of perjury:	its, in-kind contributions and habilities for this reporting period and represents the		

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to

report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	
Date Received	(aspitabetical listing required)	7,1110424		
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4920				
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			1 .	
Line 9: Total Rec	eipts over \$50 (or listed above)	0	<u></u>	
10 m . 15	into CEO and under* (not listed shous)			
ine 10: Total Rec	ceipts \$50 and under* (not listed above)	0	<u> </u>	
ine 11. TOTAL	RECEIPTS IN THE PERIOD	0	← Enter on page 1, line 2	
		<u></u>	uld include only those receipts not itemized above.	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	

Transfer of the second				

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A CONTRACTOR OF THE CONTRACTOR				
ine 9: Total Rece	sipts over \$50 (or listed above)	0		
			 -	
	eipts \$50 and under* (not listed above)	0		
ine 11: TOTAL	RECEIPTS IN THE PERIOD	0	← Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

charren exhem	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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]	L	<u> </u>	
		Line 12: Total Expenditures o	ver \$50 (or listed above)	0
Line 13: Total Expenditures \$50 and under* (not listed above)			0	
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD				0

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Jate Faid	(alphabetical fisting)			
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	,			
			U.	
,				
			CEO (on listed shove)	
		Line 12: Expenditures over \$50 (or listed above)		
		Line 13: Expenditures \$50 and under* (not listed above)		
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD			0	
	Enter on page 1, mie 4	1 1 1 2 1 1 1 1 7	ne 13 should include only those expendi	tures not itemiz

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 5

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			in the state of th	1
				•
_		Line 15: In-Kind Contribution	ns over \$50 (or listed above)	0
	4 77		ns \$50 & under (not listed above)	0
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND	CONTRIBUTIONS	0

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
4/1/2013	Paul Schlichtmæn	47 Mystic St., #8C Arlington, MA 02474	Loan to Campaign	630.00
7-7-1				
				La constitution of the con
	Enter on page 1, line 7	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALL)	°630.00